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(54) Title: A MEDICINAL SUBSTANCE FOR TOPICAL APPLICATION

(57) Abstract

A medicinal substance for topical application is disclosed. The substance comprises a water-soluble glass containing silver or a silver compound. Typically, the glass comprises phosphorus pentoxide and contains silver oxide. The substance may be used for the treatment of wounds, catheter and tubing entry points, stoma sites and body passage entrances where bacterial growth and migration are rife. The glass may be in the form of a powder, granules, woven into a dressing form, a sinter shaped in a particular way or used as filler in polymers for surface release.

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A Medicinal Substance for Topical Application 1 2 3 This invention relates to an antimicrobial composition 4 for use in medicine. The invention also relates to a 5 device for use in medicine, which embodies the said 6 composition and to a method of inhibiting or combating 7 infection. 9 This invention also relates to an antimicrobial 10 composition for use in topical applications. 11 12 The antimicrobial action of silver ions is well known 13 as are pharmaceutical formulations containing silver 14 salts as active principle. Perhaps the best known 15 example of such materials is silver sulphadiazine. 16 However, silver nitrate and silver allantoinate are 17 also used as antimicrobials. 18 19 In addition, many wounds, especially burns, are subject 20 to contamination by organisms such as bacteria and 21 fungi. The use of silver as an antiseptic agent in 22 medicine is well-known, and a variety of topical 23 preparations based on silver salts are used in the 24 treatment of such infected wounds eg silver nitrate and 25

However, problems associated with silver allantoate. 1 such compounds include pain on application, staining 2 Improved substances such as and skin irritations. 3 silver sulfadiazine are commonly used, but they must be 4 removed and re-applied frequently to maintain their 5 These compounds themselves can adverse cause effect. 6 reactions in some patients, for example a reduction in 7 the number of leucocytes in the local area available 8 for fighting infection in the wound and this method of 9 treatment also results in regular disturbance of the 10 wound, which causes discomfort to the patient. 11 12 The use of glasses which can dissolve in water and body 13 fluid and which are applied internally of the body are 14 well-known. These glasses are formed from phosphorus 15 pentoxide and may be modified to dissolve over a period 16 of minutes, months or even years, as required. 17 date, such glasses have been used, in medicine, for the 18 controlled release of a number of agents, for example, 19 drugs, hormones and trace elements, but in each case 20 the glass has been applied internally of the body to 21 allow the agent to leach out into the body's 22 23 circulatory system. 24 It is known that certain glasses, in which the usual 25 glass former, silicon dioxide, of traditional glasses 26 is replaced with phosphorus pentoxide as the glass 27 former, are soluble in water and body fluids. 28 of dissolution is controlled largely by the addition of 29 glass modifiers such as calcium and magnesium oxide. 30 In simple terms, the greater the concentration of the 31 modifier the slower is the rate of dissolution. 32 rates of dissolution which can be imparted to the 33 glasses may range from minutes to months or even to 34

It is known to include in such

several years.

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compositions quantities of trace elements such as 1 copper, cobalt and selenium which will be released from 2 the glass as it slowly dissolves over the selected 3 period of time. 4 5 The use of water-soluble glasses has been described for 6 a variety of purposes in the literature. For example, 7 UK Patent Specifications numbers 1,565,906, 2,079,152, 8 2,077,585 and 2,146,531 describe the gradual 9 dissolution of the glasses as providing a means of 10 controlled release of drugs, hormones, fungicides, 11 insecticides, spermicides and other agents with which 12 the glasses have been impregnated. The glasses are 13 used for example in the form of an implant or bolus. 14 15 UK Patent Specification number 2,030,559 describes the 16 use of selenium-impregnated water-soluble glass for 17 providing controlled release of the selenium as a trace 18 element into cattle and sheep, the glass being applied 19 as a subcutaneous insert. UK Patent Specification 20 number 2,037,735 also describes a subcutaneous implant 21 of water-soluble glass, and in this case the glass is 22 impregnated with copper; minor quantities of trace 23 elements such as boron, arsenic, iodine, manganese, 24 chromium, silver, gold and gallium may also be 25 included. 26 27 Water-soluble glass has also been proposed for use in 28 prosthetics, for example in UK Patent Specification 29 number 2,099,702, and for use in anticorrosive paints, 30 as described in UK Patent Specification number 31 2,062,612. Further the literature provides for the use 32 of such glasses in the controlled release of ferrous 33 and ferric ions into the human or animal body by 34 ingestion or implantation of the glass (UK Patent 35

Specification number 2,081,703), and for the use of 1 glasses in the controlled release of ions such as 2 lithium, sodium, potassium, caesium, rubidium, 3 polyphosphate, calcium and aluminium to patients by 4 . inclusion of the glass in a drip feed line (UK Patent 5 Specification number 2,057,420). 6 7 Our International Patent Application No PCT/GB 88/00701 8 relates to apparatus for antimicrobial use in passage 9 of fluid to or from a living body, the apparatus 10 comprising a conduit for insertion into the body, a 11 reservoir for fluid and a connector member for 12 connecting said conduit to said reservoir external of 13 the body, wherein said connector member includes a 14 water-soluble glass impregnated with elemental silver 15 or a compound of silver, said water-soluble glass 16 defining at least a part of a passageway for fluid to 17 flow between the reservoir and the conduit. 18 19 The apparatus preferably contains the impregnated 20 water-soluble glass at a site at which bacteria can be 21 introduced or increased in number, and the 22 bacteriostatic or bactericidal properties of the silver 23 has the effect of containing or reducing the risk of 24 infection in the body. The connector member may 25 comprise a first portion having an end adapted for 26 connection with said conduit and a second portion 27 having an end adapted for connection with said 28 reservoir, the first and second portions being 29 releasably secured together to define a fluid 30 passageway between the reservoir and the conduit and at 31 least one of the first and second portions having an 32 internal lining of said impregnated water-soluble 33 The internal lining may be retained between 34 spaced shoulders on the first or second portion, so 35

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that when the portions are separated the lining is held 1 in position until re-connection is made. 2 3 The connector member may be in the form of a fitting 4 which connects together upstream and downstream tubing, 5 each of the first and second portions of the connector 6 being disposed at an end of the respective tubing. 7 it becomes necessary to disconnect the tubing remote 8 from the patient, for example to replace a full 9 reservoir of fluid drained from the patient with a full 10 one, the connector can be broken and the silver reduces 11 the danger of infection to the patient through ingress 12 of bacteria. 13 14 The connector member may consist of or include a length 15 of tubing, for example of plastics material, rubber or 16 silicone rubber, in which the impregnated water-soluble 17 glass is dispersed so that the silver is released from 18 the tubing wall. 19 20 The reservoir may also contain impregnated 21 water-soluble glass, especially in the case where fluid 22 is being drained from the patient, for example in urine 23 drainage systems. During collection of the urine in 24 the reservoir in conventional systems bacteria multiply 25 and there is a risk that they may migrate along the 26 drainage tubing to the patient, thereby increasing the 27 incidence of bacteria and producing urinary tract 28 infection. Inclusion in the reservoir of an apertured 29 container in which silver-impregnated water-soluble 30 glass is disposed prevents the multiplication of 31 bacteria in the reservoir and therefore reduces the 32 infection risk. A preferable form of container has 33 been found to be a flexible braided polyester sleeve 34 closed at each end to form an elongate pouch and

containing granules of the glass. This system also 1 protects nursing staff, who are required to replace 2 full reservoirs, and/or to drain off urine from full 3 reservoirs, by preventing proliferation of bacteria in 4 the urine. 5 6 The apparatus may be used for example in urine drainage 7 systems, post-surgical drainage systems, cannula 8 systems and renal and peritoneal dialysis systems. 9 10 There is also provided a connector member having an 11 inlet and an outlet and having walling defining a 12 through passageway for flow of liquid from the inlet to 13 the outlet, at least a part of said walling being 14 formed of water-soluble glass impregnated with 15 elemental silver or a compound of silver. 16 17 According to one aspect of the present invention, there 18 is provided a medicinal substance for topical 19 application which comprises a water-soluble glass 20 containing elemental silver or a silver compound, and 21 means to maintain the substance in contact with a 22 23 surface of a body. 24 According to a second aspect of the invention there is 25 provided a method of retarding bacterial growth at the 26 surface of a body, comprising applying to the surface 27 water-soluble glass impregnated with elemental silver 28 or a silver compound, and maintaining the glass in 29 30 contact with the surface. 31 According to a third aspect of the invention there is 32 provided the use of water-soluble glass containing 33 elemental silver or a compound of silver in the 34 preparation of a medicament for the treatment of wounds 35

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and other topical infection sites. 1 2 The invention can be employed, for example, in treating 3 wounds, catheter and tubing entry points, stoma sites 4 and body passage entrances where bacterial growth and 5 migration are rife. 6 7 Preferably, said glass is adapted by the use of glass 8 modifiers to give a sustained release of silver over a 9 set period. The means to maintain the substance in 10 contact with the surface may be a carrier combined with 11 the glass or could be separate from the glass. 12 alone, the glass may be in the form of a powder, as 13 granules, as fibres that can be woven into a dressing 14 form, as a sinter which may be shaped in a particular 15 way, or cast into the required shape eg a collar to 16 surround the area of penetration of a catheter into the 17 body. 18 19 When combined with a carrier the glass may be used as a 20 filler in polymers for surface release eg in silicones, 21 natural and synthetic rubbers and medical plastics and 22 polymers. 23 24 Alternatively, the glass may be incorporated in the 25 adhesive of adhesive film dressings, in lint, wool, tow 26 and gauze dressings and as part of wound management 27 products such as foam, hydrogels and hydrocolloids, 28 films, gels and creams. 29 30 Combinations of these examples can also be used. 31 32 According to a fourth aspect of the present invention, 33 a water-soluble glass comprises an alkali metal oxide 34

 M_2 0, an alkaline earth oxide M0, phosphorus pentoxide

 P_2O_5 and silver oxide (Ag₂O). 1 2 Most preferably, said glass contains not more than 40 3 mole % M_2 0 or M0, not less than 10 mole % M_2 0 or M0, 4 and not more than 50 mole % nor less than 38 mole % 5 phosphorus pentoxide, with the inclusion of 0.05 to 5.0 6 mole % silver oxide. 7 8 Said alkali metal oxide may be sodium oxide (Na20), 9 potassium (K_20) or a mixture thereof; and said alkaline 10 earth oxide may be calcium oxide (CaO), magnesium oxide 11 (Mg0), zinc oxide (Zn0) or a mixture thereof. 12 13 The glass may also contain less than 5 mole % silicon 14 dioxide $(Si0_2)$, boric oxide (B_20_3) , sulphate ion 15 (SO_4^{2-}) , a halide ion, copper oxide (Cu0) or a mixture 16 thereof. 17 18 Typically the soluble glasses used in this invention 19 comprise phosphorus pentoxide (P205) as the principal 20 glass-former, together with any one or more 21 glass-modifying non-toxic materials such as sodium 22 oxide (Na₂0), potassium oxide (K₂0), magnesium oxide 23 (Mg0), zinc oxide (Zn0) and calcium oxide (Ca0). 24 rate at which the silver-release glass dissolves in 25. fluids is determined by the glass composition, 26 generally by the ratio of glass-modifier to 27 glass-former and by the relative proportions of the 28 glass-modifiers in the glass. By suitable adjustment 29 of the glass composition, the dissolution rates in 30 water at 38°C ranging from substantially zero to 31 25mg/cm²/hour or more can be designed. However, the 32 most desirable dissolution rate R of the glass is 33 between 0.01 and 2.0mg/cm²/hour. The water-soluble 34 glass is preferably a phosphate glass, and the silver 35

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may advantageously be introduced during manufacture as 1 silver orthophosphate (Ag₃PO₄). The content of silver 2 and other constituents in the glass can vary in 3 accordance with conditions of use and desired rates of 4 release, the content of silver generally being up to 5 5 mole %. While we are following convention in 6 describing the composition of the glass in terms of the 7 mole % of oxides, of halides and of sulphate ions, this 8 is not intended to imply that such chemical species are 9 present in the glass nor that they are used for the 10 batch for the preparation of the glass. 11 12 The optimum rate of release of silver ions into an 13 aqueous environment may be selected by circumstances 14 and particularly by the specific function of the 15 released silver. The invention provides a means of 16 delivering silver ions to an aqueous medium at a rate 17 which will maintain a concentration of silver ions in 18. said aqueous medium of not less than 0.01 parts per 19 million and not greater than 10 parts per million. 20 some cases, the required rate of release may be such 21 that all of the silver added to the system is released 22 in a short period of hours or days and in other 23 applications it may be that the total silver be 24 released slowly at a substantially uniform rate over a 25 period extending to months or even years. 26 particular cases there may be additional requirements, 27 for example it may be desirable that no residue remains 28 after the source of the silver ions is exhausted or, in 29 other cases, where the silver is made available it will 30 be desirable that any materials, other than the silver 31 itself, which are simultaneously released should be 32 physiologically harmless. In yet other cases, it may 33 be necessary to ensure that the pH of the resulting

solution does not fall outside defined limits.

1 The glass may be formed by a number of methods. 2 simply be cast by conventional or centrifugal 3 procedures, or it may be prepared via one or more 4 stages of rod, fibre or tube drawing. Other 5 preparation techniques include foamed glass or 6 comminution of the glass followed by pressing and **7** . sintering into a solid body. It may be presented for 8 example as a solid body, a powder or granules of 9 preselected size, as flakes, or in the form of a number 10 of hollow cylinders. 11 12 A preparation of this invention may comprise a 13 composite material containing one or more than one 14 The antimicrobial water-soluble glass composition. 15 properties of the preparation of the invention are due 16 entirely to the bacteriostatic properties of silver 17 18 ions. 19 The antimicrobial properties of the preparation of the 20 invention were demonstrated by placing a section of 21 silver-containing water-soluble glass, cut from a 4mm 22 rod, in culture medium. Over a period of 36 hours the 23 growth of Pseudomonas aeruginosa was inhibited. 24 similar result was obtained when the culture medium was 25 replaced with fluids recovered after use in Continuous 26 Ambulatory Peritoneal Dialysis (CAPD). The inhibition 27 of bacterial growth by slow release of silver has a 28 wide range of application in those treatments where 29 fluid enters or leaves the body by natural processes or 30 by routes introduced by surgical intervention. 31 32 One such example exists in CAPD where patients with 33 renal failure receive regular exchanges of dialysis 34 fluid introduced into the peritoneal cavity. Delivery 35

is carried out under aseptic conditions from an 1 individual bottle or plastic bag of sterile dialysis 2 fluid via a resident catheter in the lower abdomen. 3 Each time the circuit is broken there is a risk of 4 infection both at the implant site and in the 5 peritoneum which can lead to episodes of peritonitis б and also to the required removal of the implanted 7 catheter. The interposing of silver-release glass at 8 the connector sites, through which liquid entering or 9 leaving the peritoneal cavity flows, offers a barrier 10 to bacterial invasion. 11 12 Similarly, with parenteral infusions involving 13 individual cannulae and catheters the incorporation of 14 an antimicrobial barrier in accordance with this 15 invention will reduce the risk to the patient. 16 17 The antimicrobial action of silver is known. 18 the most widely used silver-based pharmaceutical 19 compositions is silver sulphadiazine which is commonly 20 used, in the form of an ointment, for the treatment of 21 burn wounds, (which are particularly subject to 22 contamination by colonising organisms, especially 23 bacteria and fungi), by topical application. 24 contact with the wound the silver sulphadiazine, both 25 components possessing antibiotic properties. 26 compound also exhibits some degree of slow or sustained 27 release of the silver and sulphadiazine because of its 28 relatively low aqueous solubility which, of course, 29 retards the dissociation necessary for release of the 30 antibiotic action. Silver nitrate and silver 31 allantoinate are also used. 32. 33 Examples of preparations of water-soluble glasses 34 containing silver (which are referred to below as 35

1 2	TABLE 1				
3				- •	
4	GLASS CODE	Na ₂ 0 mo1%	CaO mol%	P ₂ O ₅ mol%	Ag ₂ O as spec
5					
6 7	D060689-1	28	20	50	2 mole%
8	2000000-2	28	22	50	0 mole%
9	D060689-2	26	22		•
10 11	D281188-1	36 [°]	14	50_	0 mole%
12 13	D041188-1	35	14	50	1 mole%
14 15	D011288-1	35	14	50	1 mole%
16 17	D221188-1	30	19	50	1 mole%
18 19	D141288-1	30	20	50	0 mole%
20 21	D100688-1	22	25	50	10 wt%
22 23	D070989-1	26	23.5	47	3.5 mole%
24 25	D141189-1	27.75	21.75	47	3.5 mole%
26 27	J290487-4	11.63	37.44	50.00	10 wt%
28 29	J010587-2	12.63	38.44	50.88	8 wt%
30 31					
32					•
33					
34		TABLE OF GLAS	SS CODES GI	VING COMPOSIT	NOL
35					

1	SRP compositions D060689-1 (with silver) and D060689-2
2	(without silver) were used to test effectiveness against
3	organisms. Test discs of the SRP were placed on plain DST
4	agar; one control and two test discs per plate. The
5	plates were flooded with suspensions of test organisms,
6	drained and dried. After incubation the widths of the
7	zones of inhibition around the SRP discs were measured. In
8	all cases the test samples gave significant zones of
9	inhibition. In all cases, the controls (without silver)
10	showed no zones of inhibition. The organisms tested were
L1	as follows: P vulgaris, P mirabilis, P rettgeri,
L2	Providence spp., Ps aeruginosa, Staph. epidermidis, NCTC,
13	E coli, Oxford Staph., C albicans, K aerogenes,
L 4	Enterococcus, <u>Ent</u> <u>cloacae</u> . MRSA, Acinetobacter,
15	S Marcescens. The full results of this test are shown in
L6	Table 2.
L7	•
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	·
29	
30	
31	
32	
33	•

1	TABL	<u>E</u> 2	2.4	4 hrs	48	hrs
2						
3			Test	Control	Test	COLLETOI
4						
5						•
6	1.	<u>Pro vulgaris</u>	6.25	0	6.25	_
7			6.25	0	6.25	
8	2.	Pro mirabilis	6.5	. 0	6.5	0
9			6.0	0	6.25	0
10	3.	<u>Pro rettgeri</u>	5.0	0	4.25	0
11			4.75	0	4.25	0
12	4.	<u>Ps.aeruginosa</u>	6.75	0	5.75	0
13			6.75	0	6.25	0
14	· 5.	Providence spp	5.75	0	3.75	0
15			5.5	0	3.75	. 0
16	6.	NCTC E coli	6.75	0	6.75	0
17		•	6.75	O	6.75	0
18.	7.	Oxford Staph	5.75	0	5.25	0
19	, .		5.75	0	5.25	0
20	8.	Staph epidermidis	6.00	0	3.75	0
21			6.00	0	3.75	0
22	9.	C albicans	10.00	0	0	0
23			9.00	0	0	. 0
24	10.	K aerogenes	4.5	0	4.0	0
25			4.5	0	4.0	0
· 26	11.	Enterococcus	1.5	0	1.5	0
27			1.75	0	1.75	0
28	12.	Ent Cloacae	3.5	0	3.25	. 0
29			3.25	0	2.75	0
30	13.	MRSA	5.25	0	5.75	0
31			5.0	0	5.75	0
32	14.	Acinetobacter	5.5	Ó	5.75	0
33	 77.	***********	5.25	0	5.75	0
34	15.	S marcescens	6.0	0	5.5	0
	10.	J IIIGI GODGE	5.5	0	5.5	0
35			- · ·			

SRP compositions D281188-1 (without silver), D041188-1 (with silver) and D011288-1 (with silver) were subjected to gamma radiation and showed no significant change in the performance of the SRP. Samples of the SRP were tested after 0,1,2 and 3 exposures to 25 KGy of gamma irradiation. SRP composition D100688-1 (with silver) was used to test for skin reactions. Volunteers wore SRP impregnated patches for up to 10 days. No discomfort or irritation was reported. The SRP used in this test was composed of material to demonstrate the worst possible case. Incorporation of SRP composition D141189-1 (with silver) into silicone rubber sheeting has been demonstrated as a viable vehicle for the delivery of effective quantities of active silver ions. Silicone rubber sheets impregnated with SRP were cut into small discs and put onto agar which was then inoculated with various organisms. Again significant zones of inhibition were recorded and the results are shown in detail in Table 3. The SRP in the silicone samples has been formulated to release active silver ions over a 3-5 day period. Any period of release can be accommodated.

1	TABLE 3						
2							
3	<u>ORGANISM</u>	DISC					
4							
5		A30	A15	B30	B15	B10	B5
6	E coli	++	++	++	++	++	++
7	Klebsiella sp	++	++	++	++	++	++
8	Proteus sp	++	++	++	++	++	++
9	Ps aeruginosa	++	++	++	++	++	++
10	Staph aureus	+	+ .	+	+	+	. –
11	Coag neg staph	+	+	++	+	+	-
12	MRSA	+	+	++	+	+	-
13	.						
14							
15	Table Zones of inhibition	n achi	eved b	y diff	erent	silico	n
16	discs against a range of	organi	.sms (++ = C	omplet	:e	
17	inhibition of growth, + =	parti	al inh	ibitio	n of g	rowth,	- =
18	inhibition of growth).	٠					
19					-		
20	Studies have also been ca	rried	out us	ing SR	P comp	ositio	n
21	D141189-1 (with silver) t	co asse	ss sys	temic	levels	of si	lver
22	(from blood, urine, faece	es surr	oundin	g tiss	ue and	l vital	
23	organs) in mice with silv	er rel	easing	impla	nts.	No	
24	readable level of silver	was ac	hieved	excep	t in t	he loca	al
25	tissues, and possibly in	blood	and ur	ine.	Work w	vith bu	rns ·
26	patients treated with sil	lver su	lphadi	azine	has sh	own the	at.
27	silver tends to remain lo	ocal to	its i	.mplant	site	showin	g
28	little ability to migrate	throu	igh the	tissu	es. S	sheets (of
29	silicone rubber containir	ng 10%S	RP wer	e cut	into d	liscs	
30	approximately 10 mm in di						
31	implanted subcutaneously	into t	hree g	roups	of thr	ee mic	e.
32	A fourth group contained	three	mice f	or con	trol p	urpose	s .
33	into which silicone sampl	les wit	hout S	SRP wer	e impl	lanted.	
34	Group 1 mice and one cont	crol we	ere sac	rifice	ed on d	lay 2,	
35	group 2 and one control of	on day	5 and	group	3 plus	one	

35

The samples from each group were control on day 10. 1 prepared against standard solutions for analysis of silver 2 levels by atomic absorption spectrophotometry. 3 implants showed only a mild local tissue reaction with 4 silver present and no silver was detectable in the samples 5 of vital organs. 6 7 The ability of these SRP's, when incorporated in a dressing 8 or dispersed in a carrier, to sustain the release of active 9 levels of silver over a period of days or even weeks, if 10 required, offers a simple and adaptable form of treatment 11 which may be 'tailor-made' to requirements. 12 sepsis, surgical and traumatic wounds and ulcers and 13 pressure sores may be effectively treated. 14 Examples of the use of such SRP's are given below: 15 16 If the SRP powder is mixed with a filler it may be 17 a) pressed into the desired shape and then heated to fuse 18 as a sinter in its final form. 19 20 Sheet material may be formed by mixing a 21 b) polysaccharide such as alginate with SRP granules and 22 subjecting the mix to a paper-making process so 23 producing a board. Paper can be incorporated to give 24 mechanical strength. In this way a dressing or a 25 collar can be produced. 26 27 The SRP may be incorporated into silicon rubber and 28 C) the rubber then applied to the treatment area, for 29 example as a pad or collar. Catheter bodies, surface 30 linings of cannulae, drainage tubes and the like, or 31 superficial silicon coating of various instruments and 32 appliances may be protected by rubber containing SRP. 33 34

In such uses, the SRP-impregnated rubber may form the

(3)

entire wall thickness of the catheter or other tubing, or 1 may be used in the form of a sleeve or coating on the outer 2 face of a conventional catheter or tube whose wall is made 3 of PVC or other material. 4 5 A further important use of the present invention is in 6 preventing bacteria spread and growth around punctures in 7 the skin or around the entrance of body passages, for 8 example the urethra. The areas around catheters which are 9 in place for prolonged periods of time, or around stoma 10 sites, are prone to bacterial residence and multiplication, 11 and thus infection can arise. A collar of material used in 12 the present invention can be applied around the catheter or 13 stoma site in order to prevent proliferation of bacteria. 14 15 The urethra, and hence the bladder, can also become 16 infected by migration of bacteria in the perineal region, 17 especially as the environment in that area is conductive to 18 bacterial growth. To combat this, a pad, towel or tampon 19 carrying SRP may be applied to the region; and the silver 20 ions gradually released act as a bacteriostat or 21 bactericide controlling the incidence and spread of 22 bacteria over a prolonged period. 23 24 The advantages derivable from the present Application 25 include the following: 26 27 sustained and controlled release of silver ions to 28 (1)limit bacterial incidence and spread; 29 30 small quantities of silver can be used to avoid (2) 31 electrolyte imbalance and minimise the risk of 32 leukopenia, and also to reduce cost; 33 34 the glass is biodegradable and so disappears from the

1		body without adverse effect;
2		
3	(4)	the glass is compatible with existing dressings and
4		other topical applications;
5		
6	(5)	the exclusion of micro-organisms from the skin and
7		wounds prevents their proliferation and limits their
8		transfer from the site to ambient environment;
9		
10	(6)	the material used in the invention provides an
11		environment conductive to healing; and
12		
13	(7)	trace elements such as zinc and magnesium can be
14		included for additional beneficial effect.
15		
16	Embo	diments of the fourth aspect of the present invention
17		now be described by way of example with reference to
18	the	accompanying drawings, in which:
19 20		Fig. 1 is a side view of apparatus for use with the
21		present invention;
22		Fig. 2(a) and (b) are side views of different forms of
23		the apparatus in use;
24		Fig. 3 is a side sectional view of an alternative
25		connection member of this apparatus;
26		Fig. 4 is a graph of the basic glass composition of
27		the present invention in an M0, M_2 0 and P_2 05 system;
28		and,
29		Fig. 5 is a graph showing the pH of solution products
30		as a function of P205 content.
31		
32	Ref	erring to Fig. 1, the apparatus comprises an indwelling
33	uri	nary catheter 2 having inflatable balloon portions 4, 6
34	for	maintaining the catheter in position in the urethra
35	wit	h the free end 8 in the bladder to collect urine through

35

apertures 10, 12. At the outer end the catheter 2 1 terminates in a first portion 14 of a connector 16 whose 2 second portion 18 leads to tubing 20 which enters a urine 3 collection bottle 22. The bottle 22 has at its lower end 4 remote from the tubing 20 a drain plug 24. The connection 5 between the first and second portions 14, 18 of the 6 connector represents a site of potential contamination by 7 bacteria which can be introduced on releasing the connector 8 16, for example to change the bottle 22 and tubing 20. 9 10 The urine itself is contaminated and the bacteria can 11 reproduce in the bottle 22 as the urine collects in it. 12 Thus when a nurse empties the bottle 22 through the drain 13 plug 24 there is a risk of bacteria being transferred to 14 the nurse. Further, bacteria in the bottle may find their 15 way along the tubing 20, connector 16 and catheter 2 into 16 the patient's bladder, causing infection. 17 18. 19 In order to prevent such infection by bacterial 20 reproduction and transfer, the first portion 18 of the 21 connector 16 has a peripheral recess 26 defined by spaced 22 shoulders 28, 30, and a sleeve or lining 32 of 23 water-soluble glass impregnated with silver is retained in 24 the recess 26 to form part of the flow passageway for urine 25 through the connector. Further, the bottle 22 contains a ·26 braided pouch 34 within which are held granules of the 27 impregnated water-soluble glass, the pouch being tubular 28 and closed at each end. The material of the pouch 34 is 29 such that is contains interstices which allow urine to pass 30 through but which are small enough to prevent the granules 31 of the glass escaping. 32 33 In use the glass sleeve 32 and the glass in the pouch 34 34 act as a bacteriostat preventing an increase in the number

of bacteria in the urine itself and of bacteria introduced 1 in the event of the connector 16 being opened, for example 2 to change the bottle 22. This occurs by virtue of the 3 gradual dissolution of the glass, releasing the silver with 4 its bacteriostatic properties over a prolonged period. 5 composition of the glass determines the rate of silver 6 release. 7 8 Fig. 2(a) illustrates the use of a connector 16, which is 9 of similar construction to that shown in Fig. 1, in 10 peritoneal dialysis in which fluid passes from a reservoir 11 38 into the peritoneum of the patient. In this case the 12 fluid itself is sterile so the reservoir 38 need not 13 contain a pouch 34 as in Fig. 1, but the sleeve 32 is 14 required in the connector 16 to deal with bacteria which 15 may be introduced when the connector is opened in order to 16 replace the reservoir 38 when empty. Fig. 2(b) illustrates 17 the apparatus in post-surgical drainage, in which suction 18 is applied through a line 40 to the patient to draw fluid 19 from the operation site into a collection bottle 42. 20 Again, the connector 16 is of similar construction to that 21 of Fig. 1 and includes the silver-impregnated sleeve 32. 22 23 Referring now to Fig. 3, the connector 16 has first and 24 second portions 14, 18 having an ingot 44 of 25 silver-containing water-soluble glass between them. 26 ingot 44 is in the form of a solid sleeve 46 having an 27 annular flange 48 at one end to bear against an end face of 28 the second portion 18. The first and second portions 14, 29 18 each have a fitting 49, 50 for receiving an end portion 30 of rubber tubing. The sleeve 46 fits within the first 31 portion 14 so as to contact fluid passing through the 32 connector 16.

33 34

35 In the connector of Fig. 3, the ingot 44 is made by mixing

together 35 mole % of $\mathrm{NaH_2PO_4}$, 15 mole % of $\mathrm{CaHPO_4}$ and 50 1 mole % of P205, heating the mixture at 1050°C for 20 2 minutes, and cooling and grinding the glass thus obtained 3 until it forms a powder. This powder is then weighed and 4 up to 10% by weight of silver orthophosphate (Ag3PO4) is 5 added and mixed in. The mixture is then heated to 1050°C 6 to produce a homogeneous impregnated water-soluble glass, 7 cast into shape and annealed. 8 9 The granulated form of the glass provided in the pouch 34 10 of Fig. 1 can also be made in this way, with a final 11 granulation stage instead of casting. 12 13 Alternatively the silver orthophosphate can be included in 14 the original mix to allow a single heating stage. 15 16 It has been found that if the silver-impregnated 17 water-soluble glass used in these embodiments of the 18 invention is heated directly at its surface after its 19 manufacture, in a manner that creates a rapid temperature 20 gradient through the material, elemental silver forms at 21 the surface in a fine layer which in use provides an 22 initial increased rate of dissolution of the silver into 23 the fluid until the surface layer has all dissolved, after 24 which the glass dissolves as normal with a slower rate of 25 release of silver. In producing this effect it is 26 important that the heating is not sustained after the 27 formation of the silver surface layer as the glass 28 otherwise may devitrify and the release rate of the silver 29 becomes unpredictable. 30 31 The glass is dissolved by the breakup of the 3-D 32 phosphorus-oxygen skeleton by the attacking H^+ and OH^- ions 33 and molecular H20 causing the release of phosphorus-oxygen 34 fragments and associated cations. 35

```
+ INCOMPLETE IONS
                            PHOSPHATE IONS
    GLASS + WATER
1
2
          (H^+, 0H^-, H_20) (P_n O_{3n+1})^{(n+2)-} eg. (HPO_4)^{2-}
3
    The solution rate of the glass is approximately equal to
5
     the sum of the reactions of H+, OH and H20 with glass.
6
     The attack by H+ is the fastest, hence the solution rate,
7
     R, is a monotonic function of the hydrogen ion
8
     concentration, (except in very alkaline solutions).
9
10
     The pH of solution due to the dissolution of products is
11
     dependent on the composition of the glass in the ratio
12
     (M_20+MO)/P_20_5 and in the volume and flow-rate of the
13
     aqueous solvent.
14
15
     Fig. 4 shows a graph indicating the limits of the glass
16
     composition in the M0, M_20 and P_205 system. The shaded
17
     area describes the most desirable composition, ie. 38-50
18
     mole % phosphorus pentoxide and 10-40 mole % M_20 (eg.
19
     sodium oxide) and MO (eg. calcium oxide) assuming the
20
     inclusion of 0.05-5.0 mole % silver oxide. Adverse effects
21
     of pH on solution rate can be controlled by alteration to
22
     the basic glass composition.
23
24
     Fig. 5 shows this in the form of a graph showing the pH of
25
     the solution products of 2 g/l of glasses of varying
26
     composition, which have completely dissolved (ie. a
27
     concentration of 20mMol approximately).
28
29
     It is understood that the solution rate, R, of the glass is
30
     also, to some extent, dependent on the pH of the aqueous
31
     solvent. We chose to specify the solution rate, R, as mg
32
     of glass per cm2 per hour by water of pH 7.0 at 38°C.
33
     While the solution rate does not change significantly as
34
     the pH is changed from 9-4, at values of pH<4.0 the
35
```

- solution rate increases rapidly as the solvent becomes more
- 2 acid. It will be clear that if the glass is to be used in
- 3 aqueous solutions with a pH outside the range 4-8 the
- 4 composition of the glass should be selected to give the
- 5 required solution rate in an aqueous solvent of this
- 6 particular pH.

7

- 8 The temperature dependence of solution rate is the
- 9 temperature dependence of the chemical reaction and is of
- 10 the general form: $R=R_0e^{-A/kT}$ where A is the activation
- 11 energy of the solution reaction and is such that the
- 12 solution rate, R, doubles for each 10°C rise in
- 13 temperature.

14

- 15 Experiments using the invention will now be described by
- 16 way of example.

17

- 18 The silver-impregnated water-soluble glass was produced in
- 19 two forms which would enable its incorporation into the
- 20 urinary catheter collection system of Fig. 1 but using the
- 21 connector shown in Fig. 3:

22

- 23 1. A silver-impregnated glass ingot inside a plastic
- 24 connector which would be situated between the distal end of
- 25 the catheter and the proximal end of the urine collection
- 26 bag tubing. The reason for siting the silver glass here is
- 27 that many episodes of urinary tract infection in
- 28 catheterised patients are thought to result from
- 29 contamination of the catheter/bag junction when the
- 30 collection bag is disconnected and reconnected.

31

- 32 2. A porous plastic pouch containing small granules of
- 33 silver-impregnated glass which would be situated inside the
- 34 collection bag releasing silver ions into the collected
- 35 urine. This would reduce the numbers of bacteria present

in the collection bag which is thought to be a potential . 1 source of cross-infection in wards where there are several 2 catheterised patients. 3 4 5 Experiment 1 6 Brain heart infusion broth containing small pellets of 7 silver-impregnated glass were inoculated with small numbers 8 of different test organisms and the broths incubated at 9 37°C overnight. Test organisms used were 10 11 Escherichia coli 12 Pseudomonas aeruginosa 13 Proteus mirabilis 14 Klebsiella sp 15 Staphylococcus aureus 16 Staphylococcus epidermidis 17 18 The broths were subcultured after 48 hours to assess 19 whether bacterial growth had been inhibited or not. 20 Control cultures were also set up which did not contain 21 silver-impregnated glass pellets. 22 23 Experiment 2 24 25 Pooled samples of urine containing varying numbers of 26 bacteria ranging from 1 x 10⁵ to 1 x 10⁷ organisms per m1 27 of urine were run through the silver-impregnated glass 28 ingot containing connector at the rate of 1 ml per minute 29 (the approximate rate at which urine flows through a 30 urinary catheter) for 2 hours. The number of organisms 31 present in the urine before and after flowing through the 32 connector and after incubation of the collected urine at 33 room temperature for 24 hours were estimated. These were 34 compared to the numbers of organisms present in similar 35

samples of the pooled urine which had not been passed 1 through the connector. 2 3 Experiment 3 4 5 Filtered (sterile) urine was run through the 6 silver-impregnated glass connector at the rate of 1 ml per 7 minute for 2 hours as before. The connector was then 8 artificially contaminated with 1 \times 10⁶ organisms of <u>E.coli</u> 9 and sterile urine run through the connector for a further 1 10 This was to simulate contamination of the connector 11 This was to simulate contamination for a further 1 hour. 12 of the connector during changing of the collection bag. 13 The number of organisms present in the collected urine was 14 estimated immediately after collection (Time 0) and after 15 24, 48, 72 and 96 hours' incubation at room temperature. 16 17 This experiment was also carried out using nutrient broth 18instead of sterile urine (when urine was unavailable). 19 20 Experiment 4 21 22 Sterile urine was allowed to flow through the 23 silver-impregnated glass connector at the rate of 1 ml per 24 minute for 24 hours. Several samples were taken during 25 this time for silver estimation in order to gain a picture 26 of the rate of silver release into the collected urine. 27 28 Experiment 5 29 30 Filtered (sterile) urine was collected in a container 31 containing silver-impregnated water-soluble glass granules 32 in a braided plastic pouch. This urine was then 33 artificially contaminated with a known number of organisms 34 of E. coli and the collected urine incubated at room 35

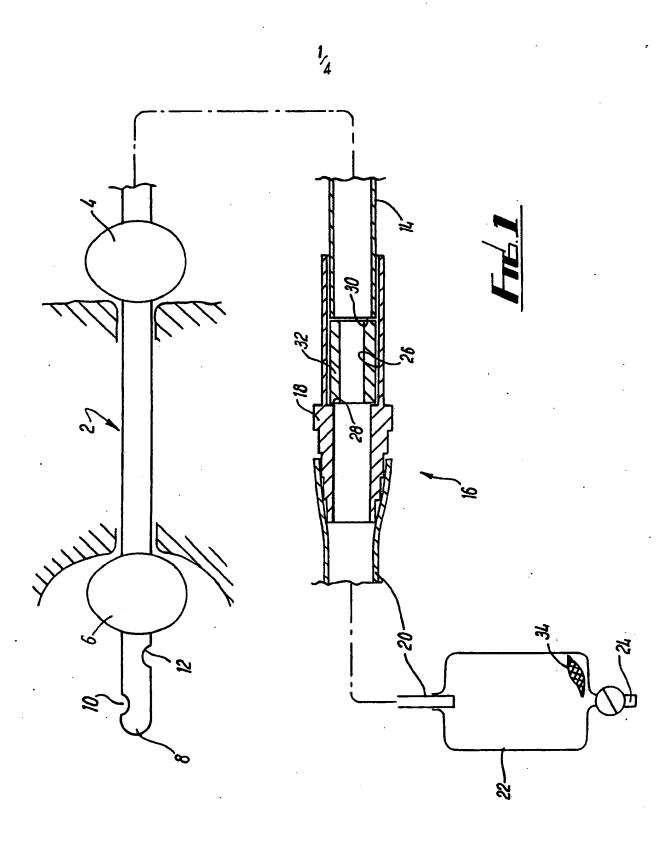
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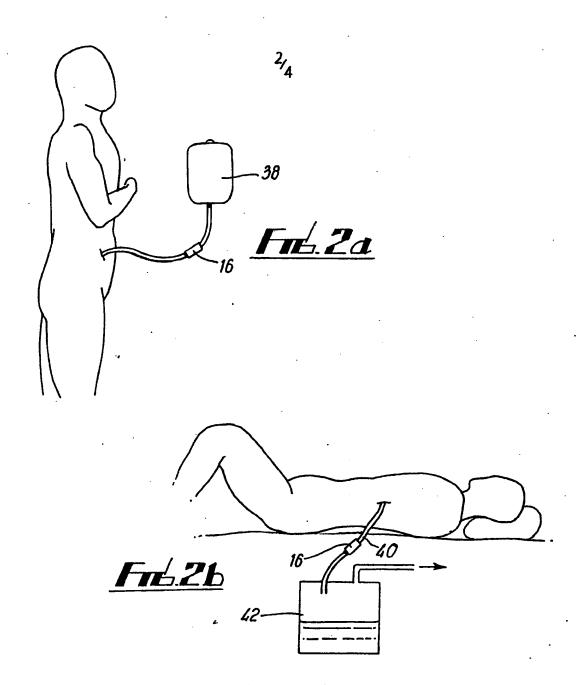
temperature for 4 days, the numbers of organisms present in 1 the urine being estimated daily. 2 3 4 Results 5 Preliminary experiments which assessed the ability of 6 silver-impregnated glass to inhibit the growth of different 7 types of bacteria showed that the glass pellets inhibited 8 the growth of all types of bacteria except the Proteus 9 mirabilis. 10 11 In Experiment 2, passing the urine through the connector 12 did not immediately reduce the numbers of organisms present 13 in the urine, but after 24 hours' incubation there was 14 approximately a ten-fold reduction in the numbers of 15 organisms in the urine which had been passed through the 16 connector when compared with the control urine. 17 18 When sterile urine or nutrient broth was used and the 19 connector artificially contaminated with E. coli, the 20 numbers of organisms in the control urine had significantly 21 multiplied after 24 hours' incubation, but the test urine 22 which had been passed through the connector showed very 23 small numbers of organisms present after 24 and 48 hours 24 and regrowth of the E. coli did not occur until after 72 or 25 96 hours' incubation. 26 27 The preliminary results of the experiments assessing the 28 use of the plastic pouch containing silver-impregnated 29 glass granules to inhibit organism growth gave positive 30 results. 31 32 Both the glass-containing connector and the plastic pouch 33 containing glass granules released enough silver to inhibit 34 the growth of bacteria and can be incorporated into urinary 35

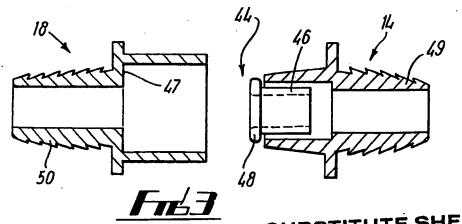
collection systems in order to reduce the risk of urinary tract infection in catheterised patients. In the above Experiments the ingot contained in the connector comprised 35 mole % NaH2PO4, 15 mole % CaHPO4 and 50 mole % P_2^{0} , and 10% by weight of silver. This resulted in a rate of release of silver of 1mg per cm2 per hour. The granules in the plastic pouch comprised 25 mole % NaH_2PO_4 , 25 mole % $CaHPO_4$ and 50 mole % P_2O_5 , with 5% by weight of silver. The silver release rate was 0.6mg per cm² per hour. In general, an increase in the amount of sodium present in the glass increases the rate of dissolution and therefore of silver release when the $P_2^{0}_5$ content remains constant. Modifications and improvements may be incorporated without departing from the scope of the invention.

1	<u>CLAI</u>	<u>ms</u>
2		
3		
4	1.	A medicinal substance for topical application
5		comprising a water-soluble glass containing elemental
6		silver or a silver compound and means to maintain the
7		substance in contact with a surface of a body.
8		
9	2.	A medicinal substance according to Claim 1, wherein
10		the water-soluble glass contains silver oxide.
11		
12	3.	A medicinal substance according to Claim 2, wherein
13		there is less than substantially 5 mole% of silver
14		oxide.
15		
16	4.	A medicinal substance according to any of Claims 1 to
17		3, wherein the water-soluble glass comprises
18		phosphorus pentoxide.
19		
20	5.	A medicinal substance according to any of Claims 1 to
21		3, wherein the substance is in the form of a powder.
22		·
23	6.	A medicinal substance according to any of Claims 1 to
24		3, wherein the substance is in the form of fibres
25		woven into a dressing form.
26		•
27	7.	A medicinal substance according to any of Claims 1 to
28		3, wherein the substance is in the form of a sinter.
29		
30	8.	A medicinal substance according to any of Claims 1 to
31		3, further comprising a polymer in which the glass is
32		used as a filler for surface release.
33		
34	9.	A method of retarding bacterial growth at the surface
35		of a body comprising applying a water-soluble glass

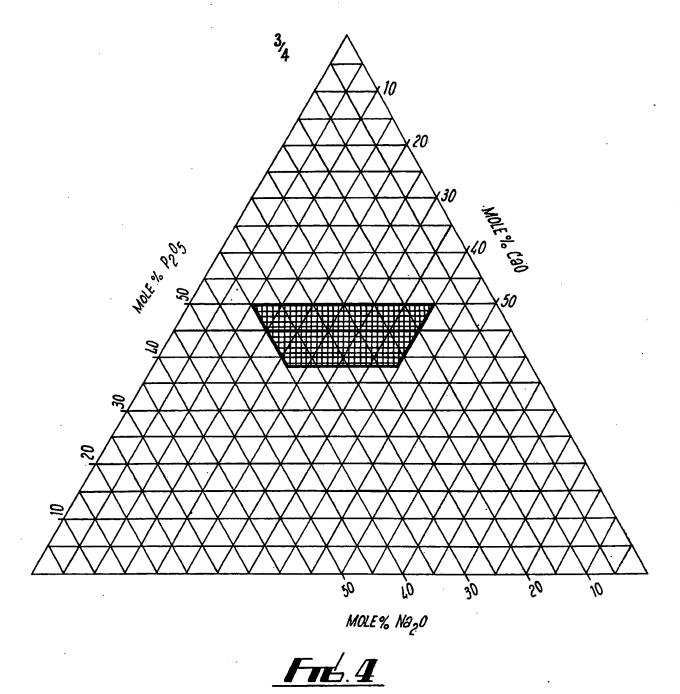
1		impregnated with elemental silver or a silver compound
2		to the surface and maintaining the glass in contact
3		with the surface.
4		
5	10.	The use of water-soluble glass containing elemental
6		silver or a compound of silver in the preparation of a
7		medicament for the treatment of wounds and other
8		topical infection sites.
9		
.0	11.	A water-soluble glass comprising an alkali metal oxide
L 1		$ exttt{M}_2 exttt{0}$, an alkaline earth oxide M0, phosphorus pentoxide
.2		P_2^{0} and silver oxide (Ag ₂ 0).
L 3		
4	12.	A water-soluble glass according to Claim 11, wherein
L 5		the glass contains substantially between 10 to 40 mole
L 6		% M ₂ 0 or M0.
.7		
L 8	13.	A water-soluble glass according to Claim 11, wherein
19		the glass contains substantially between 38 to 50 mole
20		<pre>% phosporus pentoxide.</pre>
21		
22	14.	A water-soluble glass according to Claim 11, wherein
23		the glass contains substantially between 0.05 to 5.0
24		mole % silver oxide.
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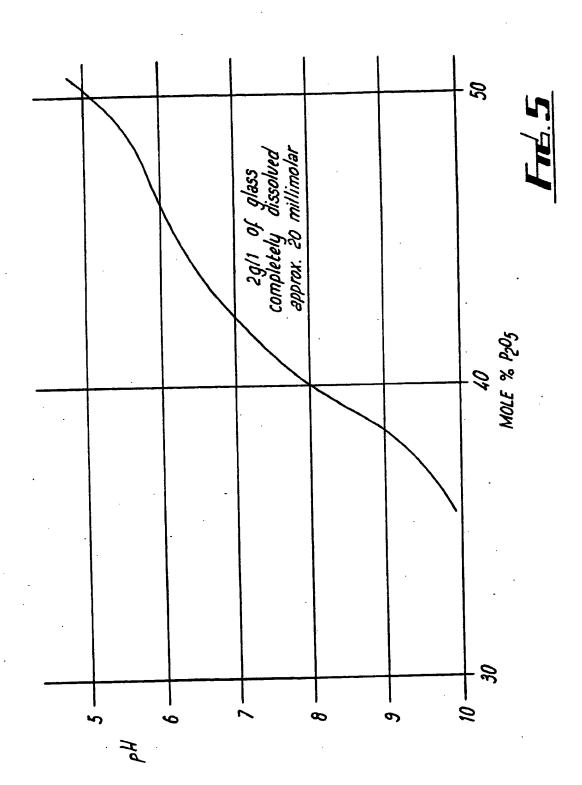




SUBSTITUTE SHEET



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INTERNATIONAL SEARCH REPORT

International Application No PCT/GB 90/00125

I. CLASSIFICATION OF SUBJECT MATTER (it several classific	estion sympols apply, indicate all) *	
Classification (IBC) as to both Nation	ant Classification and IPC	- 22/22
5 A 01 N 59/16, A 01 N 25/34,	A 01 N 25/12, A 61 1	2 29/00,
IPC: A 61 L 2/00, A 61 K 33/38		
II. FIELDS SEARCHED	orine Committee 2	
Minimum Documents		
Classification System C	lassification Symbols	
IPC ⁵ A 01 N, A 61 K, A 61	L	
Documentation Searched other this to the Extent that such Documents a	an Minimum Documentation are included in the Fields Searched *	
III. DOCUMENTS CONSIDERED TO BE RELEVANT	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	levant to Claim No. 13
Category * Citation of Document, 11 with Indication, where appro	opriate, of the relevant passages 14 ; no	levant to Claim No.
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see page 2, lines 16- lines 18-21; page 6, claims 1,3-4	-25; page 4, lines 12-23;	
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see column 3, line 68 line 23; column 15,	8 - column 4, lines 1-8;	
* Special categories of cited documents: 10 "A" document defining the general state of the art which is not considered to be of particular relevance "E" earlier document but published on or after the international filling date "L" document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified) "O" document referring to an oral disclosure, use, exhibition or other means "P" document published prior to the international filling date but later than the priority date claimed IV. CERTIFICATION Date of the Actual Completion of the international Search	"T" later document published after the in or priority date and not in conflict we cited to understand the principle or invention." "X" document of particular relevance; cannot be considered novel or car involve an inventive step "Y" document of particular relevance; cannot be considered to involve an indeximent is combined with one or ments, such combination being obvi in the art. "A" document member of the same pate	with the application but the claimed invention innot be considered to the claimed invention inventive step when the more other such document to a person skilled out family
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	AND CABLES PLC)	<u>;</u>	
	1 June 1983 see page 4, lines 4-26; page 6,	•	
į	lines 24-32; claims 1,6-7,9,10	•	
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ANNEX TO THE INTERNATIONAL SEARCH REPORT ON INTERNATIONAL PATENT APPLICATION NO.

GB 9000125 SA 34143

This annex lists the patent family members relating to the patent documents cited in the above-mentioned international search report. The members are as contained in the European Patent Office EDP file on 12/06/90

The European Patent Office is in no way liable for these particulars which are merely given for the purpose of information.

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